Received & inspected

JUN 3 0 2014

FCC Mail Room



June 27, 2014

Commission's Secretary Office of the Secretary Federal Communications Commission 9300 East Hampton Drive Capitol Heights, MD 20743

In re: WC Docket No. 10-90

To Whom It May Concern:

Per the FCC's instructions please find enclosed the original along with a copy of FCC Form 481.

If the Commission has any questions with regard to the filing, please contact the undersigned.

Sincerely,

Joshua K. Campbell

Director of Financial Operations

John K. Canglel

Jkc enclosures

> No. of Copies rec'd List ABCDE

\$ ON THE OWNER OF THE	m 481 - Carrier Annual Reporting Data Collection Form	A M	FCC Form 481 GWB Control No. 36 July 2013	sc goos/OMB Control No. 3060 Day
<010>	Study Area Code	419018		
<015>	Study Area Name	Big River Telephone Con	mpany Reb	elved & inspected
<020>	Program Year	2015		
<030>	Contact Name: Person USAC should contact with questions about this data	Joshua K. Campbell		JUN 3 0 2014
<035>	Contact Telephone Number: Number of the person identified in data line <030>	5733883720 ext.	F0	CC Mail Room
<039>	Contact Email Address: Email of the person identified in data line <030>	jcampbell@bigrivertelep	phone.com	
ANNUA	al reporting for all carriers			Completion Completion Required Required (check box when complete)
<100>	Service Quality Improvement Reporting	(co	omplete attached worksheet)	Mark
	Outage Reporting (voice)	(co	omplete attached worksheet)	
<210>		outages to report		· MINI
<300>	Unfulfilled Service Requests (voice) 0			
<310>	Detail on Attempts (voice)			1611111
	L		(attach descriptive	e document)
<320>	Unfulfilled Service Requests (broadband)			· 1811 19
<330>	Detail on Attempts (broadband)		(attach descripti	ve document)
<400>	Number of Complaints per 1,000 customers (voice)			
<410>	Fixed 1.08			V V
<420> <430>	Mobile Number of Complaints per 1,000 customers (broads	pand)		
<440>	Fixed 0.0			
<450> <500>	Mobile 0.0 Service Quality Standards & Consumer Protection R	ules Compliance (c	check to indicate certification)	v v
<510>	419018ks510.pdf		(attached descriptive document)	V V
-600>	Functionality in Emergency Situations		check to Indicate certification)	
1000 2	419018ks610.pdf		ttached descriptive document)	
<610>			,	
<700>	Company Price Offerings (voice)	(0	complete attached worksheet)	
<710>	Company Price Offerings (broadband)	. According to the control of the co	complete attached worksheet)	<u> </u>
	Operating Companies and Affiliates Tribal Land Offerings (Y/N)?		complete attached worksheet) complete attached worksheet)	V 331182
	Voice Services Rate Comparability 419018ks1010.pdf		check to Indicate certification)	
<1010	s.	6	attach descriptive document)	· .
<1100	Terrestrial Backhaul (Y/N)?	(If not,	check to indicate certification)	- Million
<1110>		(e	complete attached worksheet)	- Allie
<1200>	Terms and Condition for Lifeline Customers		complete attached worksheet)	1111111
	Price Cap Carriers, Proceed to Price Cap Additional			
<2000>	Including Rate-of-Return Carriers affiliated with Pr		rriers heck to indicate certification)	11/16
<2005>			omplete attached worksheet)	64114
<3000>	Rate of Return Carriers, Proceed to ROR Additional		et heck to indicate certification)	Milke.
<3005>		(6)	omplete attached worksheet)	THE STATE OF THE PARTY OF THE P

\$111 (255) (1) (F) (F) (F)	ervice Quality Improvement Reporting			FCC Form 481 OMB Control No.: 3060-0986/OMB Control No.: 3060-0819 July 2013
<010>	Study Area Code	419018		
<015>	Study Area Name	Big River T	elephone Company	
<020>	Program Year	2015		
<030>	Contact Name - Person USAC should contact regarding this data	Joshua K. C	Campbell	
<035>	Contact Telephone Number - Number of person identified in data line <030>	5733883720	ext.	
<039>	Contact Email Address - Email Address of person identified in data line <030>	jcampbel10h	oigrivertelephone.com	
<110>	Has your company received its ETC certification from the FCC?	(ye	es/no) O O	
<111>	If your answer to Line <110> is yes, do you have an existing §54.202(a) "5 year plan" filed with the FCC?	(ye	es/no) O O	
<112>	If your answer to Line <111> is yes, then you are required to file a progress report, on line <112> delineating the status of your company's existing § 54.202(a) "5 year plan" on file with the FCC, as it relates to your provision of voice telephony service. Attach Five-Year Service Quality Improvement Plan or, in subsequent years, your annual progress report filed pursuant to 47 C.F.R. § 54.313(a)(1). If your of CETC which only receives frozen support, your progress report is only required to address voice telephony service.	ompany is a	419018ks112.pdf	
	Please check these boxes below to confirm that the attached documents(s), on line 112, contains a progress report on its five-year service quality improvement plan pursuant to § 54.202(a). The information shall be submitted at the wire center level or census block as appropriate.	ne		Name of Attached Document
<113>	Maps detailing progress towards meeting plan targets		~	
<114>	Report how much universal service (USF) support was received		~	
<115>	How (USF) was used to improve service quality		V	
<116>	How (USF)was used to improve service coverage		V	
<117>	How (USF) was used to improve service capacity		V	
<118>	Provide an explanation of network improvement targets not met in the prior calendar year.		~	

(200) Service Outage Reporting (Voice)	FCC Form 481
Data Collection Form	OMB Cantrol No. 3060-0986/OMB Control No. 3060-0819
A STATE OF THE PROPERTY OF THE	July 2013

<010>	Study Area Code	419018
<015>	Study Area Name	Big River Telephone Company
<020>	Program Year	2015
<030>	Contact Name - Person USAC should contact regarding this data	Joshua K. Campbell
<035>	Contact Telephone Number - Number of person identified in data line <030>	5733883720 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	jcampbell@bigrivertelephone.com

<220>

<a>	<b1></b1>	<b2></b2>	<b3></b3>	<b4></b4>	<c1></c1>	<c2></c2>	<d></d>	<e></e>	<f></f>	<g></g>	<h></h>
NORS Reference Number	Outage Start Date	Outage Start Time	Outage End Date	Outage End Time	Number of Customers Affected	Total Number of Customers	911 Facilities Affected (Yes / No)	Service Outage Description (Check all that apply)	Did This Outage Affect Multiple Study Areas (Yes / No)	Service Outage Resolution	Preventative Procedures

APPLICATION AND ADDRESS.	ce Offerings Including Voice Rate Date lection Form	FCC Form A81 ONto Control No. 3060-0986/GMB Control No. 3060-0919 July 2013
<010>	Study Area Code	419018
<015>	Study Area Name	Big River Telephone Company
<020>	Program Year	2015
<030>	Contact Name - Person USAC should contact regarding this data	Joshua K. Campbell
<035>	Contact Telephone Number - Number of person identified in data line <030>	5733883720 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	jcampbell@bigrivertelephone.com
<701>	Residential Local Service Charge Effective Date 1/1/2014 Single State wide Residential Local Service Charge 20.0	

- I	K82>	433	<61>	 Residential Local			Mandatory Extended Area	
State	Exchange (ILEC)	SAC (CETC)	Rate Type	Service Rate	State Subscriber Line Charge	State Universal Service Fee	Service Charge	Total per line Rates and Fe
		-		-				-
				Sanat	tached worksheet			
				- See a	rached worksheet			
		-						

(710) Broadband Price Officings		The second secon	HER THE SECRET OF THE PROPERTY OF THE PARTY OF	CONTRACTOR AND ADDRESS OF THE PARTY OF THE P	The second contract of the second second
LANGER STREET,	AND THE PERSON OF THE PERSON O	· 我们的是他们,这么是'是一多的是'简明'的是这个,他们是这个一样没有	A STATE OF THE STA	A STATE OF THE PARTY OF THE PAR	
Data Collection Form	THE THE RESERVE THE PARTY OF TH	STATE OF ME TOWNS AND A PROPERTY		OM8 Control No. 3060-0986/OM8 (Control No. 3060-0819
				July 2013	- CONTRACTOR OF STREET
THE RESERVE THE PERSON NAMED IN COLUMN TWO IS NOT THE PERSON NAMED IN COLUMN TWO IS NAMED IN COLUMN TWO I			THE PERSON NAMED IN		

<010>	Study Area Code	419018
<015>	Study Area Name	Big River Telephone Company
<020>	Program Year	2015
<030>	Contact Name - Person USAC should contact regarding this data	Joshua K. Campbell
<035>	Contact Telephone Number - Number of person identified in data line <030>	5733883720 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	jcampbell@bigrivertelephone.com

<711>	راق	1 782	chits	\$02	- 40 M	412 2	<025	(d3>)	<d4× <="" th=""></d4×>
	State	Exchange (ILEC)	Residential Rate	State Regulated Fees	Total Rate and Fees	Broadband Service - Download Speed (Mbps)	Broadband Service - Upload Speed (Mbps)	Usage Allowance (GB)	Usage Allowance Action Taken When Limit Reached (select)
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-									
t									
-									
				See attac	ned				
-			-	worksheet -					
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t									
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(800) Ope	erating Companies	THE RESERVE OF THE PARTY OF THE	ECC Form ASI
	action Form		OMB Control No. 3060-0819
1476		为一种,在国际国际的国际的	July 2013
<010>	Study Area Code		419018
<015>	Study Area Name		Big River Telephone Company
<020>	Program Year		2015
<030>	Contact Name - Person	USAC should contact regarding this data	Joshua K. Campbell
<035>	Contact Telephone Nur	mber - Number of person identified in data line <030>	5733883720 ext.
<039>	Contact Email Address	- Email Address of person identified in data line <030>	jcampbell@bigrivertelephone.com
<810>	Reporting Carrier	Big River Telephone Company	
<811>	Holding Company	NA	
<812>	Operating Company	NA	

813>	AND AND THE RESERVE OF THE	10 m of 5023 - 1100m	and the second of the second o
Affiliate	es	SAC	Doing Business As Company or Brand Designation

(900) Trib	oal Lands Reporting		FCC Form 481	
Data Coli	ection Form		OMB Control No. 3060-0986/OMB Control No. 3060-0819)
A SHEWARD		and the same of	and the first fill the first of the second s	icany male co
				7-7-11-1-1-1
<010>	Study Area Code		419018	
<015>	Study Area Name		Big River Telephone Company	
<020>	Program Year		2015	_
<030>	Contact Name - Person USAC should contact regarding this data	020>	Joshua K. Campbell 5733883720 ext.	_
<035>	Contact Telephone Number - Number of person identified in data line < Contact Email Address - Email Address of person identified in data line <			
\0337	Contact Email Address - Email Address of person identified in data line	1030 2)	
<910>	Tribal Land(s) on which ETC Serves			
<920>	Tribal Government Engagement Obligation		Name of Attached Document	
to confir demons	ompany serves Tribal lands, please select (Yes,No, NA) for each these boxes on the status described on the attached document(s), on line 920, trates coordination with the Tribal government pursuant to \$(a)(9) includes:	(Yes,	elect es,No, NA)	
<921> <922> <923>	Needs assessment and deployment planning with a focus on Tribal community anchor institutions. Feasibility and sustainability planning; Marketing services in a culturally sensitive manner;	1000		
<924>	Compliance with Rights of way processes	-		
<925>	7	-		
	Compliance with Land Use permitting requirements		 	
<926>	Compliance with Facilities Siting rules			
<927>	Compliance with Environmental Review processes			
<928>	Compliance with Cultural Preservation review processes			
<929>	Compliance with Tribal Business and Licensing requirements.			

	Terrestrial Backhaul Reporting	FCC Form 481 OMB Control No. 3050-0986/OMB Control No. 3060-0819 July 2013
<010>	Study Area Code	419018
<015>	Study Area Name	Big River Telephone Company
<020>	Program Year	2015
<030>	Contact Name - Person USAC should contact regarding this data	Joshua K. Campbell
<035>	Contact Telephone Number - Number of person identified in data line <030>	5733883720 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	jcampbell@bigrivertelephone.com
<1120>	Please check this box to confirm no terrestrial backhaul options exist within the supported area pursuant to § 54.313(G)	
<1130>	Please check this box to confirm the reporting carrier offers broadband service of at least 1 Mbps downstream and 256 kbps upstream within the supported area pursuant to § 54.313(G)	

Lifeline	erms and Condition for Lifeline Customers	il in period	FCC Form 481 OMB Control No. 9060-0986/OMB Control No. 3060-0819 July 2013
<010>	Study Area Code		419018
<015>	Study Area Name		Big River Telephone Company
<020>	Program Year		2015
<030>	Contact Name - Person USAC should contact regarding this data		Joshua K. Campbell
<035>	Contact Telephone Number - Number of person identified in data line	<030>	5733883720 ext.
<039>	Contact Email Address - Email Address of person identified in data line	<030>	jcampbell@bigrivertelephone.com
<1210>	Terms & Conditions of Voice Telephony Lifeline Plans		419018ks1210.pdf Name of Attached Document
<1220>	Link to Public Website H	ТТР	
or the we	neck these boxes below to confirm that the attached document(s), on line 1210 bsite listed, on line 1220, contains the required information pursuant to (a)(2) annual reporting for ETCs receiving low-income support, carriers must report:	0,	
<1221>	Information describing the terms and conditions of any voice telephony service plans offered to Lifeline subscribers,	V	
<1222>	Details on the number of minutes provided as part of the plan,	V	
<1223>	Additional charges for toll calls, and rates for each such plan.	V	

(2000) Pr	ice Cap Carrier Additional Documentation	AND STREET, SAME OF STREET, SA	FCC form 481	
Data Col	ection Form	THE PERSON NAMED IN COLUMN TWO	The state of the s	0986/OMB Control No. 3060-0819
	Rate of Return Carriers of livated with Price Cap Local Exchange Carriers		July 2013	
.010	W. S. V. D. W. S.			
<010>	Study Area Code Study Area Name	419018		
<020>	Program Year	Big River Telephone Company		
<030>	Contact Name - Person USAC should contact regarding this data	Joshua K. Campbell		
<035>	Contact Telephone Number - Number of person identified in data line <030>	5733883720 ext.		
<039>	Contact Email Address - Email Address of person identified in data line <030>	jcampbell@bigrivertelephone.com		
CHECK H	ne boxes below to note compliance as a recipient of Incremental Connect Ameri	ca Phase I support frozen High Cost support High	ch Cost support to offset access charge reductions an	d Connect America Phase II
CHECK	support as set forth in 47 CFR § 54.313(b),(c),(d),(e			d Connect America Phase ii
		•		
	Incremental Connect America Phase I reporting			
<2010>	2nd Year Certification (47 CFR § 54.313(b)(1))			
<2011>	3rd Year Certification (47 CFR § 54.313(b)(2))			
	Price Cap Carrier Receiving Frozen Support Certification (47 CFR § 54.312(a))			
<2012>	2013 Frozen Support Certification			
<2013>	2014 Frozen Support Certification			
<2014> <2015>	2015 Frozen Support Certification 2016 and future Frozen Support Certification			
120132	2010 and totale Prozen Support Certification			
	Price Cap Carrier Connect America ICC Support (47 CFR § 54.313(d))			
<2016>	Certification Support Used to Build Broadband			
	Connect America Phase II Reporting (47 CFR § 54.313(e))			
<2017>	3rd year Broadband Service Certification			
<2018>	5th year Broadband Service Certification			
<2019>	Interim Progress Certification			
<2020>	Please check the box to confirm that the attached document(s), on I pursuant to § 54.313 (e)(3)(ii), as a recipient of CAF Phase II support	ine 2021, contains the required information		
	addresses of community anchor institutions to which began providir	ng access to broadband service in the	u	
	preceding calendar year.			
		l l		
<2021>	Interim Progress Community Anchor Institutions	1		
	- 50 = 0	1		
		1		
		N	ttached Document Listing Required Information	ı

(3000) Re	te Of Return Carrier Additional Documentation		FCC Fgrm 48	
Data Coll	action Form	到是自接权。 特别的国际转数处理的 。	OM8 Control	No. 3060-0986/OMB Control No. 3060-0819
	the Assistant whole the said to be a	The state of the s		
<010>	Study Area Code	419018		
<015>	Study Area Name	Big River Telephone Company		
<020>	Program Year Contact Name - Person USAC should contact regarding this data	Joshua K. Campbell		
<035>	Contact Telephone Number - Number of person identified in data line <030>	5733883720 ext.		
<039>	Contact Email Address - Email Address of person identified in data line <030>	jcampbell@bigrivertelephone.com		
CHECK	ne boxes below to note compliance on its five year service quality plan (pursuan CFR § 54.313(f)(2). I further certify that th	t to 47 CFR § 54.202(a)) and, for privately held carriers, ensue e information reported on this form and in the documents a		
				7
	9 (2) (2007 SM	1		1
(3010)	Progress Report on 5 Year Plan Milestone Certification (47 CFR § 54.313(f)(1)(i))	I		1
	wilestone Certification (47 CFR & 34.313(1)(1)(1)	No. of the last of		
		Name of Attached Document Listing Required In	formation	
	Please check this box to confirm that the attached document(s), on line 3 § 54.313 (f)(1)(ii), the carrier shall provide the number, names, and addre providing access to broadband service in the preceding calendar year.			_
		I		1
(3012)	Community Anchor Institutions [47 CFR § 54.313(f)(1)(ii)]	I		1
		Name of Attached Document Listing Required Information	<u> </u>	
(3013)	Is your company a Privately Held ROR Carrier (47 CFR § 54.313(f)(2))	(Yes/No)	OO	
	If yes, does your company file the RUS annual report	(Yes/No)	77	
		contains the required information aureupat to 5 E4 21	3(f)(2) compliance ma	udene:
	check these boxes to confirm that the attached document(s), on line 3017	, contains the required information pursuant to § 54.3 i	3(1)(2) compliance red	dires.
(3015)	Electronic copy of their annual RUS reports (Operating Report for Telecommunications Borrowers)		4	
(3016)	Document(s) for Balance Sheet, Income Statement and Statement of Car	sh Flows		
				7
(3017)	If the response is yes on line 3014, attach your company's RUS annual report and all required documentation			
		Name of Attached Document Listing Required Information	00	
(3018)	If the response is no on line 3014, is your company audited?	(Yes/No)	OO	
	If the response is yes on line 3018, please check the boxes below to			
	confirm your submission, on line 3026 pursuant to § 54.313(f)(2), contains			
(3019)	Either a copy of their audited financial statement; or (2) a financial report in a fo	384 PARA 1. 1. 1. T. AND PARA 1984 AND PARA AND PARA 1. T. P.	cations	
(3020)	Document(s) for Balance Sheet, Income Statement and Statement of Co			
(3021)	Management letter issued by the independent certified public accountant that	performed the company's financial audit.		
	If the response is no on line 3018, please check the boxes below to confirm your submission, on line 3026 pursuant to § $54.313\{f\}(2)$, contains:			
(3022)	Copy of their financial statement which has been subject to review by an			
	independent certified public accountant; or 2) a financial report in a			
	format comparable to RUS Operating Report for Telecommunications			
(near:	Borrowers,			
(3023)	Underlying information subjected to a review by an independent certified public accountant			
(3024)	Underlying information subjected to an officer certification.			
(3025)	Document(s) for Balance Sheet, Income Statement and Statement of Ca	sh Flows		
(3026)	Attach the worksheet listing required information			
		Name of Attached Document Listing Required Information		

Data Col	tion - Reporting Carrier lection Form	FCC Form 483 OMB Control Na. 3050-0986/GMB Control No. 3059-0815 July 2013
<010>	Study Area Code	419018
<015>	Study Area Name	Big River Telephone Company
<020>	Program Year	2015
<030>	Contact Name - Person USAC should contact regarding this data	Joshua K. Campbell
<035>	Contact Telephone Number - Number of person identified in data line <030>	5733883720 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	jcampbell@bigrivertelephone.com

TO BE COMPLETED BY THE REPORTING CARRIER, IF THE REPORTING CARRIER IS FILING ANNUAL REPORTING ON ITS OWN BEHALF:

Certification of Officer as to the Accuracy of the Data Reported for the Annual Reporting for CAF or LI Recipients I certify that I am an officer of the reporting carrier; my responsibilities include ensuring the accuracy of the annual reporting requirements for universal service support recipients; and, to the best of my knowledge, the information reported on this form and in any attachments is accurate. Name of Reporting Carrier: Big River Telephone Company Signature of Authorized Officer: CERTIFIED ONLINE Date 06/27/2014 Printed name of Authorized Officer: Gerard Howe Title or position of Authorized Officer: 5736513373 ext. Study Area Code of Reporting Carrier: 419018 Filling Due Date for this form: 07/01/2014 Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

THE RESIDENCE OF LITTLE	Certification - Agent / Certier DMB Control No. 3060-0986/OMB Control							
<010>	Study Area Code	419018						
<015>	Study Area Name	Big River Telephone Company						
<020>	Program Year	2015						
<030>	Contact Name - Person USAC should contact regarding this data	Joshua K. Campbell						
<035>	Contact Telephone Number - Number of person identified in data line <030>	5733883720 ext.						
<039>	Contact Email Address - Email Address of person identified in data line <030>	jcampbell@bigrivertelephone.com						

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING ANNUAL REPORTS ON THE CARRIER'S BEHALF:

I certify that (Name of Agent)	is authorized to submit the information reported on behalf of the reporting carri-
also certify that I am an officer of the reporting carrier; agent; and, to the best of my knowledge, the reports an	onsibilities include ensuring the accuracy of the annual data reporting requirements provided to the authorize provided to the authorized agent is accurate.
Name of Authorized Agent:	
Name of Reporting Carrier:	
Signature of Authorized Officer:	Date:
Printed name of Authorized Officer:	
Title or position of Authorized Officer:	
Telephone number of Authorized Officer:	
Study Area Code of Reporting Carrier:	Filing Due Date for this form:

TO BE COMPLETED BY THE AUTHORIZED AGENT:

Certification of Agent Authorized to File Annual Reports for CAF or LI Recipients on Behalf of Reporting Carrier						
, as agent for the reporting carrier, certify that I am auth the data reported herein based on data provided by the r		ice support recipients on behalf of the reporting carrier; I have provided ne information reported herein is accurate.				
Name of Reporting Carrier:						
Name of Authorized Agent or Employee of Agent:						
Signature of Authorized Agent or Employee of Agent:		Date:				
Printed name of Authorized Agent or Employee of Agent:						
Title or position of Authorized Agent or Employee of Agent						
Telephone number of Authorized Agent or Employee of Ag	gent:					
Study Area Code of Reporting Carrier:	Filing Due Date for this form:					

Attachments

AND RESERVED TO	ce Offerings including Voice Rate Data lection Form	PCC Form 481 ***********************************
<010>	Study Area Code	419018
<015>	Study Area Name	Big River Telephone Company
<020>	Program Year	2015
<030>	Contact Name - Person USAC should contact regarding this data	Joshua K. Campbell
<035>	Contact Telephone Number - Number of person identified in data line <030>	5733883720 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	jcampbel1@bigrivertelephone.com
<701>	Residential Local Service Charge Effective Date 1/1/2014	

20.0

<703>

<702> Single State-wide Residential Local Service Charge

ca1>	492>	ca3>		Residential Local	A33>		Mandatory Extended Area	**
State	Exchange (ILEC)	SAC (CETC)	Rate Type	Service Rate	State Subscriber Line Charge	State Universal Service Fee	Service Charge	Total per line Rates and Fe
KS			FR	20.0	0.0	0.0	0.0	20.0
		-						
		-						
								
		-						
		-						

(710) Broadband Poles Offerings	THE WASHINGTON THE PARTY OF THE	FCC Form481
Data Collection Form		OMB Control No. 3060-0986/OMB Control No. 3060-0819
		July 2013

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<015>	Study Area Name	Big River Telephone Company
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<039>	Contact Email Address - Email Address of person identified in data line <030>	jcampbell@bigrivertelephone.com

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State	Exchange (ILEC)	Residential Rate	State Regulated Fees	Total Rates and Fees	Broadband Service - Download Speed (Mbps)	Broadband Service -Upload Speed (Mbps)	Usage Allowance (GB)	Usage Allowance Action Taken When Limit Reached {select}
KS		0.0	0.0	0.0	0.0	0.0	0.0	Other, NA
		 						
		-						
		 						
		 	-					